County: Milwaukee Facility ID: 1510 Page 1

LAKEWOOD HLTH/REHAB CENTER 2115 EAST WOODSTOCK PLACE

MI LWAUKEE 53202 Phone:	(414) 271-1020		Ownershi p:	Corporati on
Operated from 1/1 To 12/31 Days	of Operation:	366	Highest Level License:	Skilled
Operate in Conjunction with Hospita	ıl?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed	(12/31/00):	246	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/	(00) :	246	Average Daily Census:	216
Number of Residents on 12/31/00:		219		

Services Provided to Non-Residents		Age, Sex, and Primary Diagn	Length of Stay (12/31/00)	%				
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	25. 6	
Supp. Home Care-Personal Care	No					1 - 4 Years	40. 2	
Supp. Home Care-Household Services	No	Developmental Disabilities	0. 5	Under 65 17.8		More Than 4 Years	34. 2	
Day Services	Services No Mental II		20. 5	65 - 74	17. 4			
Respite Care Yes		Mental Illness (Other)	8. 7	75 - 84	32. 9		100. 0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	25. 6	*************	******	
Adult Day Health Care No		Para-, Quadra-, Hemi plegi c	0. 5	95 & 0ver	6. 4	Full-Time Equivalent		
Congregate Meals No		Cancer		1.8		Nursing Staff per 100 R		
Home Delivered Meals Yes		Fractures	5. 5		100. 0	(12/31/00)		
Other Meals	No	Cardi ovascul ar	12. 3	65 & 0ver	82. 2			
Transportation	No	Cerebrovascul ar	17. 4			RNs	7. 5	
Referral Service	No	Di abetes	4. 1	Sex	%	LPNs	10. 0	
Other Services	Yes	Respi ratory	6. 4			Nursing Assistants		
Provide Day Programming for		Other Medical Conditions	22. 4	Male	31. 1	Aides & Orderlies	27. 6	
Mentally Ill	Yes			Female	68. 9	İ		
Provide Day Programming for			100.0			İ		
Developmentally Disabled	No		. also also also also also also	 	100. 0		ale ale ale ale ale ale ale ale	

Method of Reimbursement

	Medicare Medicaid (Title 18) (Title 19)				W. 322 3												
						0ther			p	Private Pay			Managed Care			Percent	
		(1111	Per Di		Per Diem			• • • • • • • • • • • • • • • • • • • •			Per Dien	O				Of All	
Level of Care	No.	%		No.	. %	Rate	 No.	%	Rate	 No	. %	Rate	No.	%		No.	Resi dents
Int. Skilled Care	0	0.0	\$0.00	12	6. 1	\$123. 21	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	12	5. 5%
Skilled Care	7	100.0	\$284.03	172	86. 9	\$105.28	0	0. 0	\$0.00	9	100.0	\$150.00	5 1	100. 0	\$150.00	193	88. 1%
Intermediate				14	7. 1	\$87.36	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	14	6. 4%
Limited Care				0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care				0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care				0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0%
Dev. Di sabl ed				0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain In	j. 0	0.0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Depende	nt 0	0.0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	7	100. 0		198	100. 0		0	0.0		9	100. 0		5 1	100. 0		219	100. 0%

LAKEWOOD HLTH/REHAB CENTER

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condi ti	ons, Services, and	d Activities as of 12.	/31/00
Deaths During Reporting Period							
				9	% Needi ng		Total
Percent Admissions from:		Activities of	%	Ass	sistance of	% Totally	Number of
Private Home/No Home Health	11.3	Daily Living (ADL)	Independent	0ne	Or Two Staff	Dependent	Residents
Private Home/With Home Health	4. 2	Bathi ng	10. 0		48. 9	41. 1	219
Other Nursing Homes	7. 7	Dressi ng	23. 7		46. 6	29. 7	219
Acute Care Hospitals	69. 0	Transferri ng	40. 2		45. 2	14. 6	219
Psych. HospMR/DD Facilities	1.8	Toilet Use	32. 4		32. 4	35. 2	219
Rehabilitation Hospitals	4. 2	Eati ng	71. 2		14. 2	14. 6	219
Other Locations	1.8	**************	*********	*****	*******	********	*******
Total Number of Admissions	168	Conti nence		%	Special Treatmen	ts	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	8. 7	Receiving Respi	iratory Care	4. 1
Private Home/No Home Health	19.8	0cc/Freq. Incontine	nt of Bladder	59.8	Recei vi ng Trac	heostomy Care	0. 5
Private Home/With Home Health	16. 9	Occ/Freq. Incontine	nt of Bowel	48. 4	Recei vi ng Suct	i oni ng	0. 0
Other Nursing Homes	8. 1				Receiving Osto	my Care	0. 5
Acute Care Hospitals	18. 0	Mobility			Recei vi ng Tube	Feedi ng	5. 5
Psych. HospMR/DD Facilities	2.3	Physically Restrain	ed	11.4	Receiving Mecha	anically Altered Diets	s 15. 1
Rehabilitation Hospitals	0. 0						
Other Locations	5.8	Skin Care			Other Resident C	haracteri sti cs	
Deaths	29. 1	With Pressure Sores		8. 7	Have Advance D	i recti ves	25. 6
Total Number of Discharges		With Rashes		5. 0	Medi cati ons		
(Including Deaths)	172				Receiving Psych	hoactive Drugs	53. 0

		Ownershi p: Propri etary		Bed Size:		Li censure:			
	Thi s			20	00 +	Skilled		Al l	[
	Facility	Peer	Peer Group % Ratio		Peer Group		Peer Group		ities
	%	%			Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	87. 8	74.6	1. 18	80. 3	1.09	81. 9	1. 07	84. 5	1.04
Current Residents from In-County	95. 4	84. 4	1. 13	84. 7	1. 13	85. 6	1. 11	77. 5	1. 23
Admissions from In-County, Still Residing	31. 5	20. 4	1. 55	28. 9	1.09	23. 4	1. 35	21.5	1.47
Admissions/Average Daily Census	77. 8	164. 5	0. 47	96. 3	0. 81	138. 2	0. 56	124. 3	0. 63
Discharges/Average Daily Census	79. 6	165. 9	0. 48	100.6	0. 79	139. 8	0. 57	126. 1	0. 63
Discharges To Private Residence/Average Daily Census	29. 2	62. 0	0.47	26. 4	1. 10	48. 1	0. 61	49. 9	0. 58
Residents Receiving Skilled Care	93. 6	89. 8	1.04	88. 4	1.06	89. 7	1.04	83. 3	1. 12
Residents Aged 65 and Older	82. 2	87. 9	0. 94	90. 4	0. 91	92. 1	0.89	87. 7	0.94
Title 19 (Medicaid) Funded Residents	90. 4	71. 9	1. 26	73. 5	1. 23	65. 5	1. 38	69. 0	1. 31
Private Pay Funded Residents	4. 1	15. 0	0. 27	18. 7	0. 22	24. 5	0. 17	22.6	0. 18
Developmentally Disabled Residents	0. 5	1.3	0. 35	1. 2	0.37	0. 9	0. 51	7. 6	0.06
Mentally Ill Residents	29. 2	31. 7	0. 92	33. 1	0. 88	31. 5	0. 93	33. 3	0. 88
General Medical Service Residents	22. 4	19. 7	1. 14	20.6	1.09	21. 6	1.04	18. 4	1. 21
Impaired ADL (Mean)	45. 9	50. 9	0. 90	52. 0	0.88	50. 5	0.91	49. 4	0. 93
Psychological Problems	53. 0	52. 0	1.02	49. 4	1.07	49. 2	1. 08	50. 1	1.06
Nursing Care Required (Mean)	4. 9	7. 5	0. 65	6.8	0. 72	7. 0	0. 70	7. 2	0. 69